File with:

lowa Ethics and Campaign Disclosure Board 510 E. 12<sup>th</sup>, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073

# Reset Form

FOR INSTRUCTIONS, SEE BACK OF FORM CAMPAIGN DISCUSSIONE BD.



L	1 dx. 515-261-4075	DISCLOSURE S	UMMARY PAGE			J.
	COMMITTEE NAME (Must be	e same as on Statement of Organiz	ration)	AT 19	AM 9: 57	
	•	- Supervisor	•		FORM	 
	IMPORTANT: Indicate by # type (1) Statewide/Legislative/Judge (4) County Central Committee (1)	of committee you are reporting for: Standing for Retention Candidate (2)S County Candidate (6)City Candidate by PAC (9)City PAC (10)School Boa	itate PAC (3)State Party	al C (	DR-2 (Rev. 07/2007) For Office Use On	
	CANDIDATE COMMITTEES	ONLY:		=		
-	Candidate Name	1.1.	Political Party (if applicable)			
	Randy Do	1 King	Lipublican			
	Office Sought Lina County	Supervisor	District (if Senate or House)		Audited	
À	ate reports are subject to possil	ole civil and criminal penalties. Pursua	319 -377-3434 TELEPHONE	4(7) and	68A.401(3), the ca	08
1/	AM FILING A 5/19	108	_ REPORT FOR (1) ELECTION	//2\NO	I EL ECTION VE	NB.
		port date)	Indicate by		4-ELECTION TEA	AR.
	CHECK IF AMENDMENT TO	REPORT DATED			mmittees, enter Dat	o of Classics
	Check if this is final (termina (You must continue to	tion) report and attach Notice of Di- file reports until a DR-3 is filed.)	ssolution Form DR-3.	County 8	Local Committees, ection is held	3
_	STATEM	ENT OF CASH ON HAND				
C	committee. This amo	ing of the reporting period. (Total o unt <b>MUST</b> be the same as the cash eriod or must be zero if this is first re	on hand at the end	\$		0
		TAKEN IN THIS PERIOD				
	Schedule A: Cash Co	ntributions total (Attach Schedule A	A) (*also see in-kind below)	•••••		300,00
	Schedule F: Loans R	eceived total (Attach Schedule F)	••••••			500°°
	Schedule H: Total Sa	les of Campaign Property (Attach S	Schedule H)			6°°
	(Schedule H	applies to Candidates' Committe	es Only)			0 00
			SUB-TOTAL	\$		800
		MONEY SPENT THIS PERIOD				. 0 : 211
		ures total (Attach Schedule B) (**al	-			631,34
		payments total (Attach Schedule F)				0 00
C/	ASH ON HAND at the end of the	his reporting period (if final report b	palance must be zero)	\$		70.66
**[	UNPAID BILLS (From Schedu	ile D - Attach Schedule D)		\$		0
*	N KIND CONTRIBUTIONS (F	rom Schedule E - Attach Schedule	E)	\$		0
		m Schedule F - Attach Schedule F)		\$		50000
CC	ONSULTANT BREAKDOWN	(Schedule G Attached?)			YES _K_N	10
<u>C</u>	ANDIDATE COMMITTEES OF	NLY:			•	
VA	ALUE OF CAMPAIGN PROPI	ERTY (From Schedule H - Attach S	chedule H)	\$		)
ST	ATE COMMITTEES: Submit	a reconciled campaign account ba	nk statement in January of each	ı year.		

## For Instructions, See Back of Form

### **CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

CHECK THIS BOX IF COMMITTEE NAME (Must be same as on Statement of Organization) AMENDING FORM Linn County Republican Central Committee Oakley For Supervisor

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
4/12/08	ID# CK#	Dale R Thompson 6808 Stone Medow Dr.8W Cedar Rapids IA 52404	Friends	\$ 5000	
4/30/08	ID# CK#	Larry Helling 2910 New Costle Road Marion TA 52302	Friend	25000	
	ID# CK#				
	ID# CK# ID#				
	CK#				
	CK#				
	CK#		SUB-TOTAL		

TOTAL (if last page of this schedule)

(for Schedule A)

**SCHEDULE** 

Α

(Rev. 07/03)

MONETARY

RECEIPTS

Reset Form

<sup>\*</sup> Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) . If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Reset Form

## **EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE <b>B</b> (Rev. 07/03)	MONETARY EXPENDITURES				
CHECK THIS BOX IF					

COMMITTEE NAME (Must be same as on Statement of Organization)

Linn County Republican Central Committee Oakley For Superisor

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
5/14/08	ID4	Victory Store , com 5200 SW 30ST Daven port IAJ280	100 18824 " Campaign Signs	\$ 474.04
3/28/08	ID# CK#	Illusions Fine Portrature 124129ST NE	Publicity Picture Invoice 22988	37 <sup>50</sup>
	ID# CK#	Cadar Rapids IA 52402	Gect 3101	
3/28/08	ID# CK#	11	11	67.60
5/3/8	ID# CK#	Sams Club Cedar Rapids IA	Envelopes For Mailing & Clipboard	52,20
	ID# CK#			
	ID# CK#			
	ID# CK#			

SUB-TOTAL

TOTAL (if last page of this schedule)

\$631.34 \$631.34

#### THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

Page	of	
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COMMITTEE	NAME(Must be same as on Statement of Organiz	zation)			Revolution of	SCHEDULE F	
Oakley For Supervisor							LOANS RECEIVED
		& REPAID					
	chedule reports money loaned to the committee was NID LOANS FROM <u>LAST</u> REPORTING PERIOD \$		nia committee acc	ount.		L_ICHECK TI	HIS BOX IF
	•				•	L	ST OINN
PART I - MONETARY LOANS RECEIVED <u>THIS</u> REPORTING PERIOD (Original source of loan, such as a bank, must be shown if a third party is involved. Include loans from candidate's personal funds.)					NETARY LOAN REPAYMENTS MADE <u>THIS</u> ans forgiven must be reported on Schedule E -	REPORTING PER	IOD ons.)
DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable*)	AMOUNT OF LOAN	DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, if Applicable)	RELATIONSHIF TO CANDIDATE	AMOUNT
	Randy Oakler		\$			(If Applicable)	\$
4/15/08	7915 Marquetted FME	Se 18	500°°				*
	Randy Oakler 7915 Marque Hedr ME Cedar Rapids FA 52402		200				
							-
					•		
						<u></u>	
					j		
		•					<del> </del>
	TOTAL (PART I)	\$ <u>500</u>	2		TOTAL CASH REPAYMENTS (PART	//) s	S
				F	rom Schedule E - TOTAL LOANS FORGIVEN		0
TOTAL OUTSTANDING LOANS END OF REPORT PER						· · · · · · · · · · · · · · · · · · ·	<u> </u>
i making a contr	requires candidate committees to disclose the relibution to the committee. Relationship must be sh	our to the third daw				·- Ψ <u></u>	
the same as ca	Diddo relatives) and affinity (relatives by marriage)	If cumama of some					
relationship col	umn when it applies.	nor applicable in th	0		Page/	of /	
						(for Schedule F)	<del></del>